

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION | INITIALS | ID NO. | DATE |
|---------------------|----------|--------|----------|
| FEES DETERMINATION | TJ | | 12/2/99 |
| O.I.P.E. CLASSIFIER | | 31 | 12/1/99 |
| FORMALITY REVIEW | 69853 | | 12/22/99 |

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)... Canceled A Appeal
 ÷ Restricted O Objected

| Claim | Final | Original | Date |
|-------|-------|----------|----------|
| 1 | ✓ | ✓ | 11/26/99 |
| 2 | ✓ | = | |
| 3 | ✓ | = | |
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| Claim | Final | Original | Date |
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| Claim | Final | Original | Date |
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If more than 150 claims or 10 actions
staple additional sheet here

(LEFT INSIDE)